

APPLICATION DATA SHEET**Application Information**

Application number::
Filing Date:: 01/29/02
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit:: 1653
CD-ROM or CD-R?:: None
Number of CD disks::
Number of copies of CDs::
Sequence submission?:: Yes
Computer Readable Form (CRF)?:: Yes
Number of copies of CRF:: 1
Title :: COMPOUNDS AND METHODS FOR CANCER THERAPY
Attorney Docket Number:: 100086.401C12
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 28
Small Entity?:: Yes
Petition included?:: No
Petition Type::
Licensed U.S. Gov't Agency::
Contract or Grant No::
Secrecy Order in Parent Appl.?:: No

First Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Orest
Middle Name:: W
Family Name:: Blaschuk
Name Suffix::
City of Residence:: Westmount
State or Province of Residence:: Quebec
Country of Residence:: Canada
Street of mailing address:: 4998 de Maisonneuve West, Suite 1520
City of mailing address:: Westmount
State or Province of mailing address:: Quebec
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: H3Z 1N2

Second Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Barbara
Middle Name:: J
Family Name:: Gour
Name Suffix::
City of Residence:: Kemptville
State or Province of Residence:: Ontario
Country of Residence:: Canada
Street of mailing address:: 2890 Donnelly Drive, RR#4

City of mailing address:: Kemptville
State or Province of mailing address:: Ontario
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: K0G 1J0

Third Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Riaz
Middle Name::
Family Name:: Farookhi
Name Suffix::
City of Residence:: Montreal
State or Province of Residence:: Quebec
Country of Residence:: Canada
Street of mailing address:: 4242 West Hill Avenue
City of mailing address:: Montreal
State or Province of mailing address:: Quebec
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: H4B 257

Correspondence Information

Correspondence Customer Number :: **00500**

Representative Information

Representative Customer Number::		00500
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Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Continuation of	09/357,717	07/20/99
09/357,717	Continuation-in-part of	09/248,074	02/10/99
09/248,074	Continuation-in-part of	08/996,679	12/23/97
08/996,679	Continuation-in-part of	08/893,534	07/11/97
08/893,534	Non-provisional of	60/021,612	07/12/96

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::	Adherex Technologies, Inc.
Street of mailing address::	600 Peter Morand Crescent, Suite 220
City of mailing address::	Ottawa
State or Province of mailing address::	Ontario
Country of mailing address::	Canada
Postal or Zip Code of mailing address::	K1G 5Z3